

People who experienced childhood adversity had poorer COVID-19 outcomes, new study shows

November 30 2023, by Jamie Hanson



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Adults who faced adversity during childhood were significantly more likely to die from or be hospitalized because of COVID-19. That's the

key finding of [my team's recent study](#), published in the *Journal of Epidemiology and Community Health*.

The study of 150,000 adults in the United Kingdom found those reporting the most [childhood](#) trauma had a 25% greater likelihood of death associated with COVID-19, as well as a 22% increase in hospitalization after contracting COVID-19. These figures held up even after accounting for demographics and health conditions.

Childhood trauma includes physical, emotional or [sexual abuse](#), neglect, household dysfunction and [what many call "toxic stress."](#)

Our study relied on the [UK Biobank](#), a large biomedical database with more than 500,000 volunteers ages 40 to 69 throughout the United Kingdom. Close to one-third of those volunteers provided information about their childhood. Our team took that data and then searched medical records for participants who died or were hospitalized because of COVID-19. Though more research is needed, these initial results highlight the lasting impacts of childhood stress and the need to provide psychological support early on to mitigate lifelong health risks.

Why it matters

COVID-19 had killed nearly [7 million people worldwide](#) as of November 2023. This underscores the importance of understanding all of the [risk factors](#) leading to pandemic-related hospitalization and death.

Prior research has examined the demographic risk factors for COVID-19, including age, race, ethnicity, income and education. But this is the first study to link [childhood experiences](#) to adult COVID-19 outcomes.

The striking findings of the study suggest that early childhood trauma

should be added to the list of risk factors for illness—not only for COVID-19 but perhaps for other diseases as well.

The study also suggests that communities disproportionately affected by adversity and trauma may be particularly vulnerable to negative health outcomes. This includes communities where there are high levels of neighborhood violence, stress and poverty.

What other research is being done

Our research was prompted by a growing body of work that has found an association between [adverse childhood experiences and health problems in adulthood](#). Adults experiencing significant childhood abuse have an [increased risk for chronic conditions](#), including [heart disease](#), lung disease, cancer and premature death.

Researchers are still trying to understand how childhood adversity contributes to negative health outcomes in adulthood. It could be primarily biological in nature. For instance, adversity has been linked to excess inflammation. Inflammation is normally a protective response from the body, triggered by harmful stimuli such as pathogens, damaged cells or toxins. However, excessive inflammation is related to strokes, heart attacks and other [health conditions](#) and can [lead to more negative COVID-19 outcomes](#).

In contrast, the links between early adversity and poorer health could be behavioral in nature. Adversity is associated with having [less money](#) or [education](#) as an adult. These factors could, in turn, be associated with less access to and subpar medical care. Studies have shown that [people with lower incomes and lower-paying jobs](#) were exposed to COVID-19 in the workplace more often. Adversity is also associated with [depression and challenges to emotion regulation](#). This in turn could result in downstream changes in [biology and behavior](#).

What's next

Our team plans to continue investigating large population studies—that is, at least 30,000 to 50,000 participants—to determine whether adverse childhood experiences relate to other health outcomes, [like long COVID](#).

It's becoming increasingly clear that learning more about how [childhood trauma](#) becomes embedded in the body could inform our understanding of possible interventions and long-term health outcomes, including those potentially connected to COVID-19.

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